

Duluth Joint Powers Enterprise Trust

The Doctor is in (our network)

Keep your doctor or choose from our large network. HealthPartners is accepted at most clinics and hospitals. And, you can see a specialist in the network without a referral!



Your medical plan benefits	3
Tools and resources	7
Health and wellness	8
Using your plan	11

Open Access Plan

Key plan features

- **Preventive care** — Routine preventive care is typically covered at 100 percent. Please check your Summary of Benefits for exact coverage information.
- **Access** — You can see any network doctor you choose. You don't need a referral to see a specialist in the network.
- **Family friendly** — Family members can visit any doctor or clinic in the network.

How your plan works

The Open Access plan gives you the freedom to see any network doctor at any time. It's that simple.

Also, you have network access to many services like:

- Office visits
- Convenience and online care
- Urgent and emergency care
- Hospital care
- Specialty care

Your Open Access network

- Choose from more than 700,000 doctors and other care providers, plus 6,000 hospitals in the United States.
- Find a doctor by visiting **healthpartners.com/cityofduluth** and searching the Open Access network.
 - » Search for doctors by name, clinic name, specialty, language, gender, hours of business, parking and more.
 - » Learn how doctors rate on cost and quality.

Understanding your plan

- **Routine preventive care** includes screenings, check-ups and counseling to prevent illness, disease or other health problems before you have symptoms. For more information, visit **healthpartners.com/preventive**.
- **Copay** is the amount you will pay for medical services. It is usually a flat amount such as \$40 for each office visit (\$40 copay).
- **Coinsurance** is the share of the service costs that you are responsible for paying. It is listed as a percentage. If you have 80 percent coverage, that means you pay 20 percent of the total cost.
- Your **deductible** is the amount you pay before your coverage starts. It is usually listed as an "annual" amount.
- Your **out-of-pocket maximum** is the total amount the plan requires you to pay toward the cost of your medical coverage. Your out-of-pocket maximum excludes outpatient prescription drug costs. Please note, out-of-pocket does not include premiums, noncovered services or out-of-network provider charges that exceed the HealthPartners allowed amount.



For more information and help deciding which plan is best for you, check out HealthPartners cost calculators and Plan Comparison Tool at **healthpartners.com/cityofduluth**.



HealthPartners®

**Duluth Joint Powers Enterprise Trust
Comprehensive Hospital-Medical
Benefit Plan 3A**



Effective January 1, 2012

The following is an overview of your coverage. For exact coverage terms and conditions, consult your plan materials, or call Member Services at (952) 883-5000 or 1-800-883-2177.

Plan Highlights	In-Network	Out-of-Network±
Partial listing of covered services	Care from a network provider (Open Access Network)	Care from an out-of-network provider
Deductible and Lifetime/Out-of-Pocket Maximums		
Lifetime Maximum	Unlimited	\$2,000,000
Calendar year deductible	\$250 per person; \$500 per family	
Calendar year medical out-of-pocket maximum	\$1,250 per person; \$2,500 per family	
Preventive Health Care		
Routine physical exam*	100% coverage	100% coverage
Routine cancer screening*	100% coverage	100% coverage
Routine eye exam*	100% coverage	100% coverage
Routine hearing exam*	100% coverage	100% coverage
Lab and x-ray services	100% coverage	100% coverage
Immunizations	100% coverage	100% coverage
Prenatal and postnatal care	100% coverage	100% coverage
Well-child care	100% coverage	100% coverage
One routine physical, cancer screening, eye and hearing exam per calendar year will be covered under preventive health care. Subsequent physicals, cancer screenings, eye and hearing exams will be treated as a physician office visit.		
Physician Office Visits		
Illness or injury (including lab and x-ray services, and outpatient surgery)	80% coverage after deductible	80% coverage after deductible
Allergy-related services	80% coverage after deductible	80% coverage after deductible
Physical, occupational & speech therapy	80% coverage after deductible	80% coverage after deductible
Chiropractic care (neuromusculo-skeletal conditions only)	80% coverage after deductible	80% coverage after deductible
Behavioral Health Care (Inpatient and Outpatient Services)		
Mental health care	80% coverage after deductible	80% coverage after deductible
Chemical dependency health care	80% coverage after deductible	80% coverage after deductible
Convenience Care		
Convenience clinics (e.g., Retail / Minute Clinics)	80% coverage	80% coverage
eVisits	80% coverage	80% coverage
virtuwell – Online care	80% coverage	80% coverage



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Plan Highlights	In-Network	Out-of-Network±
Partial listing of covered services	Care from a network provider (Open Access Network)	Care from an out-of-network provider
Emergency Care		
Urgent Care	80% coverage after deductible	80% coverage after deductible
Emergency care at a hospital Emergency Room	80% coverage after deductible	80% coverage after deductible
Ambulance	80% coverage after deductible	80% coverage after deductible
Hospital Care (Inpatient and Outpatient Services)		
Illness or Injury (including lab and x-ray services, and surgery)	80% coverage after deductible	80% coverage after deductible
Scheduled inpatient and outpatient procedures	80% coverage after deductible	80% coverage after deductible
Outpatient MRI and CT scan	80% coverage after deductible	80% coverage after deductible
Durable Medical Equipment		
Durable medical equipment	80% coverage after deductible	80% coverage after deductible
Prosthetics	80% coverage after deductible	80% coverage after deductible
Medical Supplies	80% coverage after deductible	80% coverage after deductible
Outpatient Prescription Drug Benefits administered through ClearScript		
The following is an overview of your prescription drug benefit coverage. For exact coverage terms and conditions, consult your plan materials, call Customer Service at 1-800-546-5677 or visit www.clearscript.com.		
Tier One	Generic Drugs	\$0 Co-payment
Tier Two	Preferred Brand Name Drugs	\$15 Co-payment
Tier Three	Non-Preferred Brand Name Dugs Specialty Drugs	30% Co-insurance (\$30 minimum/\$100 maximum)

± Members using out-of-network providers may be responsible for filing their own claims and for any charges that exceed the HealthPartners allowed amount. These amounts are not applied to the out-of-pocket maximum. Additionally, out-of-network providers and facilities may not take care of notification requirements. Please refer to your health plan summary document or contact HealthPartners Member Services for a description of charges that are your responsibility.

Additionally, you must call CareCheck® at (952) 883-5800 or 1-800-942-4872 to receive maximum benefits when using out-of-network providers for in-patient hospital stays; same-day surgery; new or experimental or reconstructive outpatient technologies or procedures; durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. HealthPartners will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. ***Please note, benefit payments may result in a reduction of the maximum coverage available to you under the Plan if CareCheck® is not notified.***

virtuwell®: the 24/7 online clinic

Getting sick is no fun. It means feeling rotten and taking time away from work. But getting better is easy with virtuwell, a 24/7 online clinic. It treats common conditions like cold, flu, sinus infection, pinkeye and bladder infection. Plus, you can use it for you or your kids!

Saves you money

Because virtuwell costs \$40, you pay just 20 percent. No deductible applies to virtuwell visits. Your out-of-pocket cost is \$8 -- that's less than the cost of going to a doctor or urgent care clinic!

Treats many common illnesses

virtuwell treats around 30 common conditions including:

- Cold
- Cough
- Allergy
- Flu
- Pinkeye
- Sinus infection
- Acne
- Bladder infection
- Yeast infection
- Lice
- Sty
- Rashes and other skin irritations

Easy to use

When you visit **virtuwell.com**, you take a quick online interview. Then, a nurse practitioner looks at your answers, completes your personal diagnosis and sends you a treatment plan with a prescription, if needed.

If you need to see a doctor in person, virtuwell will tell you before you enter any personal information. It's that easy.

If you're not completely satisfied with your experience — for any reason — virtuwell will refund your money.

What is it like to use virtuwell?

Hear from those who have already tried it.

YES

- Was it simple to use? 99%
- Was it worth the cost? 96%
- Would you highly recommend it? 98%



Let's get you better. virtuwell.com.

Help when you have questions about your coverage or health

As a HealthPartners member, you have personal support when you need it. Contact us when you have questions about your coverage or your health – we're here to help.

If you have questions about...	Call	Go Online
<ul style="list-style-type: none"> Your coverage or claims Finding a doctor or specialist Health plan services 	Member Services Available Monday through Friday, 7 a.m. to 7 p.m., CST Call the Member Services phone number on the back of your Member ID card. Or call 952-883-5000, 800-883-2177 or 952-883-5127 (TTY). Español: 952-883-7050 o 866-398-9119 Interpreters are available if you need one.	Log on to healthpartners.com/ cityofduluth
<ul style="list-style-type: none"> Whether you should see a doctor Home treatment options A medicine you're taking 	CareLineSM Service — Nurse advice line Available 24/7, 365 days a year Call 612-339-3663, 800-551-0859 or 952-883-5474 (TTY)	Visit healthpartners.com/ healthlibrary
<ul style="list-style-type: none"> Understanding your health care and benefits How to choose a treatment option 	HealthPartners[®] Nurse NavigatorSM Program Available Monday through Friday, 7 a.m. to 7 p.m., CST Call 952-883-5000, 800-883-2177 or 952-883-5127 (TTY)	Visit healthpartners.com/ decisionsupport
<ul style="list-style-type: none"> Your pregnancy The contractions you're having Your new baby 	BabyLine Phone Service Available 24/7, 365 days a year Call 612-333-2229 or 800-845-9297	Visit healthpartners.com/ healthlibrary
<ul style="list-style-type: none"> Finding a mental or chemical health care professional in your network Your behavioral health benefits 	Behavioral Health Personalized Assistance Line (PAL) Available Monday through Friday, 7:30 a.m. to 5 p.m., CST Call 952-883-5811 or 888-638-8787	Log on to healthpartners.com/ cityofduluth



When your 5-year-old wakes up with a fever at 2 a.m., call CareLine for help. The nurses are there for you to get his fever down, even in the middle of the night.

To learn more, visit **healthpartners.com/cityofduluth**.
 You can also call HealthPartners Member Services at **952-883-5000**,
800-883-2177 or **952-883-5127 (TTY)**.

Using your plan

Here are some tips and tools to help you get the most out of your HealthPartners plan.



1. Create your account at healthpartners.com

With a *myHealthPartners* account you can:

- View your benefits
- See your claims
- Search your network for doctors and other care providers
- Get your health plan documents delivered online



2. Manage your health care costs

To help you budget throughout the year:

- Estimate how much your health care will cost using the Annual Planner.
- Be a smart health care shopper and use the cost calculators to compare costs for doctors, treatments and more.

Find these tools at healthpartners.com/cityofduluth.



3. Get support for your health






- Get free virtual coaching to improve your health. Topics include getting active, quitting smoking and more. Go to healthpartners.com/healthyliving.
- Find useful information and tools in the Health Information Library at healthpartners.com/healthlibrary.



Start using your plan by logging on to *myHealthPartners* at healthpartners.com/cityofduluth.

Knowing where to go saves you time and money

When you choose a health plan, you want to know how much you will pay for care. With so many options, it can be confusing to know where to go. Use this information to help you get the best care while managing your out-of-pocket costs.



When you need:	Go to	Average cost	Average time spent
Health advice from a nurse. For example, if you have questions about: <ul style="list-style-type: none"> • Sore throat • Cold or cough • Upset stomach 	CareLine SM Service – Call CareLine 24/7 at 612-339-3663 or 800-551-0859	Free	
Treatment advice and prescriptions for minor medical issues. For example: <ul style="list-style-type: none"> • Sinus infection • Yeast and urinary tract infections • Pinkeye 	Convenience Clinics (found in retail and grocery stores) or Online Clinics	\$	
A regular checkup or care for urgent problems during the day. For example: <ul style="list-style-type: none"> • Immunizations • Ear infection • Strep throat 	Primary Care Clinics	\$\$	
Care for urgent problems when primary care clinics are closed. For example: <ul style="list-style-type: none"> • Cuts that need stitches • Possible broken bones • Sprains 	Urgent Care Clinics	\$\$\$	
Help in an emergency for serious or life-threatening illnesses or injuries. For example: <ul style="list-style-type: none"> • Chest pain or shortness of breath • Serious cuts and burns • Head injury 	Emergency Room	\$\$\$\$	



For more cost information and tools,
visit healthpartners.com/smartshopper.

24/7 access to your health information

At home, at work or on-the-go, you're in control of your health care with online and mobile tools.

Online	Mobile phone
 <p>Visit healthpartners.com/cityofduluth to:</p> <ul style="list-style-type: none"> • Search for doctors and specialists by name, clinic, language, gender and more • Look up cost and quality ratings for doctors and clinics • See your claims and benefits • Go paperless with online delivery of health plan documents • View and print a new Member ID card <p>Visit healthpartners.com/healthyliving to:</p> <ul style="list-style-type: none"> • Find tools, tips, discounts and mobile apps on topics that best fit your health goals • Interact with a virtual coach • See useful health topics in the Health Information Library 	 <p>Use your smart phone and visit m.healthpartners.com to:</p> <ul style="list-style-type: none"> • Search for clinics, urgent care and hospitals by ZIP Code or current location (if your phone has GPS) • Find clinic and hospital phone numbers, maps and hours of operation • See and fax your Member ID card • Call HealthPartners CareLineSM service for free 24/7 nurse advice



Personalized for you and your family

Visit **healthpartners.com/cityofduluth** and sign up for a *myHealthPartners* account. It's the best way to see your specific plan information. Registration is easy. Just make sure you have your Member ID card available.

For help with registration, usernames or passwords, call Web Support at **952-853-8888, 877-726-0203 or 952-883-5127 (TTY)**. Help is available 8 a.m. to 5 p.m., CST, Monday through Friday.

Your one-stop health and wellness spot

Want to live a healthier life but can't find the time or don't know where to start? We can help. As a HealthPartners member, you have the support, tools and resources you need to live a healthier life without slowing you down. We'll help you focus on what's important to you — whether you're healthy or have a condition.

Personal support

- **Get group support.** Meet new people and get the support of others like you. Take one of our classes or attend a group session — topics include asthma, car seat clinics, weight loss and more.
- **Quit with help from a health coach.** Quitting smoking can be hard, but you don't have to do it alone. Work with a health coach to quit at your own pace in a way that works for you.
- **Make the right decision for you.** It can be hard to know which treatment option is best for you. Get help making the right decision for you based on your values and your life.
- **Get one-on-one help for conditions.** Call us 24/7 to speak with someone about your health. Work with a health coach to get more of what you want for your life.

Tools and resources

- **Find information about your health.** Visit our Health Information Library and search more than 8,000 health topics. You'll also find symptom checkers and other great tools.
- **Stay up-to-date.** Find out when you or your family members are due for vaccines, lab tests, screenings and routine check-ups with our preventive care guidelines.
- **Watch, listen and interact online.** Sometimes a pep talk is all it takes to get motivated. Our virtual health coach can help you add activity to your life, quit smoking, stress less and more.
- **Sign up to get weekly texts for new parents.** You'll get three texts each week with helpful tips for you and your baby's health. Sign up by texting BABY (or BEBE for Spanish) to 511411.
- **Make healthy eating choices.** HealthPartners yumPower knows that when you eat better, you feel better. Visit yumpower.com to find tasty, good-for-you foods and healthy eating tips that will power your body and help you live the best life possible.



To start using these tools, discounts and resources, visit healthpartners.com/cityofduluth.

Estimate your health care costs

When you're picking a plan or getting health care, it's helpful to know what your costs will be. HealthPartners makes it easy to get cost information with online tools. Get started today by visiting healthpartners.com/cityofduluth.

If you want to know...	Use this tool	How it'll help
How much will I spend on health care this year?	Under Medical Cost Calculators, use Annual Planner	<ul style="list-style-type: none">• Budget health care expenses based on family history.• Figure out how much you'll spend on medicines, trips to the doctor, etc.
How much will I have to pay for care?	Provider Cost Comparison or, under Medical Cost Calculators, use Treatment Costs	<ul style="list-style-type: none">• See average costs for many types of care, from ear infection to surgery.• Know how much care costs before you go to the doctor.
How do I find the best, most affordable care?	Provider Cost Comparison	<ul style="list-style-type: none">• Compare prices for 120 common health care services at 500 different clinics and hospitals in the Twin Cities.



To use these tools, visit healthpartners.com/cityofduluth.

Provider reimbursement information for medical plans

Our goal in reimbursing providers is to provide affordable care for our members while encouraging quality care through best care practices and rewarding providers for meeting the needs of our members. Several different types of reimbursement arrangements are used with providers. All are designed to achieve that goal.

- Some providers are paid on a “**fee-for-service**” basis, which means that the health plan pays the provider a certain set amount that corresponds to each type of service furnished by the provider.
- Some providers are paid on a “**discount**” basis, which means that when a provider sends us a bill, we have negotiated a reduced rate on behalf of our members. We pay a predetermined percentage of the total bill for services.
- Sometimes we have “**case rate**” arrangements with providers, which means that for a selected set of services the provider receives a set fee, or a “case rate,” for services needed up to an agreed upon maximum amount of services for a designated period of time. Alternatively, we may pay a “case rate” to a provider for all of the selected set of services needed during an agreed upon period of time.
- Sometimes we have “**withhold**” arrangements with providers, which means that a portion of the provider’s payment is set aside until the end of the year. The year-end reconciliation can happen in one or more of the following ways:
 - » Withholds are sometimes used to pay specialty, referral or hospital providers who furnish services to members. The provider usually receives all or a portion of the withhold based on performance of agreed upon criteria, which may include patient satisfaction levels, quality of care and/or care management measures
 - » Some providers — usually hospitals — are paid on the **basis of the diagnosis** that they are treating; in other words, they are paid a set fee to treat certain kinds of conditions. Sometimes we pay hospitals and other institutional providers a set fee, or “**per diem**,” according to the number of days the patient spent in the facility.
 - » Some providers — usually hospitals — are paid according to Ambulatory Payment Classifications (APCs) for outpatient services. This means that we have negotiated a payment level based on the resources and intensity of the services provided. In other words, hospitals are paid a set fee for certain kinds of services and that set fee is based on the resources utilized to provide that service.
 - » Occasionally our reimbursement arrangements with providers include some **combination** of the methods described above. For example, we may pay a case rate to a provider for a selected set of services needed during an agreed upon period of time, or for services needed up to an agreed upon maximum amount of services, and pay that same provider on a fee-for-service basis for services that are not provided within the time period or that exceed the maximum amount of services. In addition, although we may pay a provider such as a medical clinic using one type of reimbursement method, that clinic may pay its employed providers using another reimbursement method.

Check with your individual provider if you wish to know the basis on which he or she is paid.

Notice of grandfathered medical plan

Your employer believes this medical plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to your employer. If you are on a plan subject to ERISA, you may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 866-444-3272 or dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans. You may also contact the U.S. Department of Health and Human Services at healthreform.gov.

Summary of utilization management programs

HealthPartners utilization management programs help ensure effective, accessible and high quality health care. These programs are based on the most up-to-date medical evidence to evaluate appropriate levels of care and establish guidelines for medical practices. Our programs include activities to reduce the underuse, overuse and misuse of health services. These programs include:

- Inpatient concurrent review and care coordination to support timely care and ensure a safe and timely transition from the hospital
- “Best practice” care guidelines for selected kinds of care
- Outpatient case management to provide care coordination
- The CareCheck® program to coordinate out-of-network hospitalizations and certain services.

We require prior approval for a small number of services and procedures. For a complete list, go to **healthpartners.com** or call Member Services. You must call CareCheck® at 952-883-5800 or 800-942-4872 to receive maximum benefits when using out-of-network providers for in-patient hospital stays; same-day surgery; new or experimental or reconstructive outpatient technologies or procedures; durable medical equipment or prosthetics costing more than \$3,000; home health services after your visits exceed 30; and skilled nursing facility stays. We will review your proposed treatment plan, determine length of stay, approve additional days when needed and review the quality and appropriateness of the care you receive. Benefits will be reduced by 20 percent if CareCheck® is not notified.

Our approach to protecting personal information

HealthPartners complies with federal and state laws regarding the confidentiality of medical records and personal information about our members and former members. Our policies and procedures help ensure that the collection, use and disclosure of information complies with the law. When needed, we get consent or authorization from our members (or an authorized member representative when the member is unable to give consent or authorization) for release of personal information. We give members access to their own information consistent with applicable law and standards. Our policies and practices support appropriate and effective use of information, internally and externally, and enable us to serve and improve the health of our members, our patients and the community, while being sensitive to privacy. For a copy of our privacy notice, please visit **healthpartners.com/cityofduluth** or call Member Services at 952-883-5000 or 800-883-2177.

Services not covered

After you enroll, you will receive plan materials that explain exact coverage terms and conditions. This plan does not cover all health care expenses. In general, services not provided or directed by a licensed physician are not covered. The following is a summary of excluded or limited items:

- Treatment, services or procedures which are experimental, investigative or are not medically necessary
- Dental care or oral surgery†
- Non-rehabilitative chiropractic services
- Eyeglasses, contact lenses, hearing aids and their fittings
- Private-duty nursing; rest, respite and custodial care†
- Cosmetic surgery†
- Vocational rehabilitation; recreational or educational therapy
- Sterilization reversal and artificial conception processes†
- Physical, mental or substance-abuse examinations done for, or ordered by third parties†
- Out-of-network coverage may also exclude preventive health care services

† except as specifically described in your plan materials.

THIS PLAN MAY NOT COVER ALL YOUR HEALTH CARE EXPENSES.

READ YOUR PLAN MATERIALS CAREFULLY TO DETERMINE WHICH EXPENSES ARE COVERED.

For details about benefits and services, call Member Services at 952-883-5000 or 800-883-2177.



What is yumPower?

yumPower is all about finding tasty, good-for-you foods that power your body and help you live the best life possible. After all, when you eat better, you feel better! Get started at yumpower.com — your mind, body and taste buds will thank you.

